



ENTRY FORM



51st Annual Summerset Regatta October 7th, 8th & 9th, 2016

Yacht Name: _____ Club: _____ U.S. Sailing # _____ Exp. _____

Owner of Record: _____ Cell Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Boat Make/Length: _____ Draft: _____

Skipper: _____ E-mail: _____

During the Regatta the boat will be docked at: _____

WPHRF Rating: Buoy: _____ RLC: _____ Sail # (mandatory) _____

Class entered (check one) Saturday and Sunday:

PHRF Spinnaker One Design PHRF Multi-Hull PHRF Non-Spinnaker

PHRF True Cruising Sunday only Cruiser Distance Race

RELEASE OF LIABILITY

I have read and understand, and hereby agree to be bound by "USSA Racing Rules of Sailing 2013-2016" and by all other rules that govern this Regatta. I hereby warrant that my yacht will be outfitted, equipped and handled in accordance with these rules, that she will have all required equipment aboard, that she will be seaworthy in hull, rig, and gear, and she will be competently manned. I do, for myself, my executors, personal representatives, administrators, heirs and assigns waive any and all claims that may accrue to me or them against the Caloosahatchee Marching and Chowder Society, its Race Committee, Officers, Directors, members, employees, volunteers and sponsors, and any one or more of them arising out of the participation of my yacht in these races, or arising from any activities related to this Regatta. I further understand that misconduct of the crew of my yacht during this Regatta shall be grounds for disqualification of the yacht under my command from the race.

Skipper's signature

Date

Race Entry Fee-\$80.00 (\$72.00 with proof of USSA Membership) \$ _____

Cruiser (Includes Sundays Cruisers Race) - \$50.00 per boat \$ _____

Cotton T-Shirt (one free per entry): **Specify Size** _____

Sat. October 8th: Cocktail Party Hosted by Bootleggers at Salty Sams

2 free tickets per registration; _____ additional tickets at \$5.00 ea. \$ _____

Sun. Oct. 9th: Awards Banquet: No. Attending _____ x \$30.00/ person \$ _____

Specify number of dinner selections: Chicken: _____ Fish: _____ Pork: _____

Additional T-Shirts: S-XL, \$15.00 each XXL, \$17.00 each

Mark sizes for T-Shirts S _____ M _____ L _____ XL _____ XXL _____ \$ _____

Make checks payable to: CMCS **Grand Total** \$ _____

All reservations and checks will stand non-refundable

Deadline: 1700 hrs, Saturday, October 1 st, 2016

No entries or dinner reservations will be accepted at the Skippers Meeting

Mail signed entry, check and copy of WPHRF certificate to:

JERRY CANNING, 4908 SW 11th Place, Cape Coral, FL 33914

phone: 775-846-4600

E-mail: gwcanning@comcast.net